

## EXHIBIT 20

IN THE UNITED STATES DISTRICT COURT  
FOR THE NORTHERN DISTRICT OF OHIO  
EASTERN DIVISION

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IN RE: NATIONAL PRESCRIPTION      MDL No. 2804  
OPIATE LITIGATION                      Case No. 17-md-2804

This document relates to:              Judge Dan  
   Aaron Polster

The County of Cuyahoga v. Purdue  
Pharma, L.P., et al.  
Case No. 17-OP-45005

City of Cleveland, Ohio vs. Purdue  
Pharma, L.P., et al.  
Case No. 18-OP-45132

The County of Summit, Ohio,  
et al. v. Purdue Pharma, L.P.,  
et al.  
Case No. 18-OP-45090

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VOLUME II

Videotaped Deposition of Joseph Rannazzisi

Washington, D.C.

May 15, 2019

8:43 a.m.

Reported by: Bonnie L. Russo

Job No. 3301884

1 law.

2 BY MR. LANIER:

3 Q. All right. In the third page, you  
4 go on to say, here are some circumstances that  
5 might indicate there is diversion going on; is  
6 that right?

7 A. Yes, sir.

8 Q. And these -- you gave four examples,  
9 much like you have told us in here before, were  
10 concerns that you had or that people could look  
11 at -- strike that. Let me start that question  
12 again.

13 You give four circumstances that  
14 might indicate diversion; is that fair to say?

15 A. Yes, sir.

16 Q. Ordering excessive quantities of a  
17 limited variety of controlled substance while  
18 ordering few, if any, other drugs.

19 Why would that perhaps be indicative  
20 or perhaps indicate diversion?

21 A. Well, for the most part, pharmacies  
22 generally follow a pattern of ordering for  
23 controlled substances and depending on what we  
24 have read, it could be anywhere as low as 9  
25 percent to up to 12 or 13 percent as the

1 average. So it is a red flag when a pharmacy  
2 is ordering, you know, 40, 50 percent of their  
3 drugs has controlled substances, you know, and  
4 looking at the legend or the noncontrolled  
5 drugs, you've got to ask questions.

6 Why are you not ordering? If you  
7 are a full service pharmacy, why are you not  
8 ordering noncontrolled legend drugs?

9 Q. All right. So we've got a red flag  
10 on that.

11 The second one you gave is ordering  
12 a limited variety of controlled substances in  
13 quantities that are disproportionate, not in  
14 proportion, to the quantity of noncontrolled  
15 medications ordered.

16 Is that also a red flag?

17 A. Again, same concept. No. 1 handles,  
18 you know, where we are only ordering large  
19 quantities of oxycodone, hydrocodone, nothing  
20 else or oxycodone, hydrocodone, alprazolam.

21 The second one is again, you are  
22 taking the hydrocodone and the oxycodone and it  
23 is far exceeding what you are ordering normal  
24 noncontrolled drugs. So it's disproportional.

25 If the normal pharmacy is ordering

1       between 9 and 12 percent of the drugs of  
2       controlled substances and this pharmacy is  
3       ordering 40 or 50 percent and it is limited, it  
4       is limited to oxycodone, hydrocodone --  
5       oxycodone, hydrocodone and hydromorphone, that  
6       should set up red flags. It even goes deeper  
7       if they were ordering a high dose of those  
8       drugs.

9           Q.     All right. Order excessive  
10       quantities of limited varieties in combination  
11       with excessive quantities of lifestyle drugs.  
12       Another red flag?

13          A.     Yes. That was tapping into the  
14       three drug combination, the panel that we were  
15       seeing, things like alprazolam, hydrocodone and  
16       carisoprodol or hydrocodone -- or oxycodone,  
17       carisoprodol and alprazolam, diazepam,  
18       clonazepam, any of those different combinations  
19       of drugs that is unusual.

20          Q.     You are throwing out a bunch of  
21       words that most of us have never heard of in  
22       our life because we just get told, go buy Advil  
23       or something like that.

24                 You're -- are these those -- these  
25       are the chemical names that you are using for